

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Yasushi ENOKIDO

Serial No: 10/530,068

Confirmation No.: 7550

Filed: September 30, 2005

For: METHOD FOR PRODUCING PHOTONIC  
CRYSTAL, AND PHOTONIC CRYSTAL

Art Unit: 1722

Examiner: Robert M. Kunemund

Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Sir:

Transmitted herewith is an amendment in the above-identified application.

☐ No additional fee is required.

The fee has been calculated as shown below:

|  | (Col. 1)<br>CLAIMS REMAINING<br>AFTER AMENDMENT |   | (Col. 2)<br>HIGHEST NUMBER<br>PREVIOUSLY PAID FOR | (Col. 3)<br>PRESENT<br>EXTRA* | LG/SM<br>\$ ENTITY FEE | ADD'L<br>FEE DUE                                     |
|--|---|---|---|-------------------------------|------------------------|--|
| TOTAL CLAIMS FEE   | 33  | - | 24  | **                            | 9                      | \$ 450.  |
| INDEPENDENT<br>CLAIMS FEE  | 2   | - | 3   | ***                           | 0                      | \$ 0   |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIMS                          |   |   |   |                               |                        | LARGE ENTITY FEE = \$380<br>SMALL ENTITY FEE = \$180 |
| ADDITIONAL SIZE FEE (IF ANY) (TOTAL PAGES OF SPEC AND DRAWINGS TOGETHER) |   |   |   |                               |                        | \$250 FOR EACH ADDITIONAL 50<br>SHEETS               |
| TOTAL  |   |   |   |                               |                        | \$ 450.  |

\* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box on Col. 1 of a prior amendment or the number of claims originally filed.

- ☒ Please charge our Deposit Account No. 50-1314 in the amount of \$450. to cover the extra claim fee.
- ☒ The Commissioner is hereby authorized to charge any deficiencies of fees associated with this communication or credit any overpayment to Deposit Account No. 50-1314.
- ☒ Any filing fees under 37 C.F.R. § 1.16 for the presentation of extra claims
- ☒ Any patent application processing fees under 37 C.F.R. § 1.17

Respectfully submitted,  
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Date: January 3, 2008

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